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| <p>NATIONAL AERONAUTICS AND SPACE ADMINISTRATION</p> <p>DRYDEN FLIGHT RESEARCH CENTER</p> <p>EDWARDS CALIFORNIA 93523</p> | <p><u>DATA REQUIREMENT DESCRIPTION</u></p> | <p>1. RFP #: ODIN</p> <p>2. DRD #: DFRC 7 Page 1 of 1</p> |
| <p>3. TITLE: NASA Mishap Report NASA Form 1627</p> | | |
| <p>DATA REQUIREMENT DESCRIPTION</p> | | |
| <p>4. TYPE: Reports</p> <p>5. Frequency of Submission: Within 24 hours of each mishap or injury requiring more than first aid..</p> <p>6. Distribution: 1 complete set to DFRC NASA Safety Office, Mail Stop 2128; DOCO</p> <p>7. Initial Submission: Within 24 hours of each mishap or injury requiring more than first aid following the effective date of Delivery Order</p> <p>8. Remarks:</p> <p>9. Use: Provide visibility for Center tracking of accidents.</p> <p>10. Reference:</p> <p>11. Interrelationship: Reportable mishaps should correspond with information required on the NASA Mishap Report.</p> <p>12. Preparation Information:</p> <p>The contractor shall submit a NASA Mishap Report on NASA Form 1627 to the DFRC NASA Safety Office and the DOCO within twenty-four hours of a work related mishap or injury.</p> | | |